

W16000032506

(Requestor's Name)

(Address)

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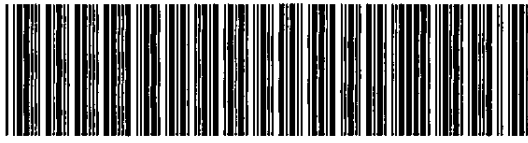
(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_



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02/10/16--01005--019 \*\*105.00

Special Instructions to Filing Officer:

W16000013084  
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Office Use Only

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16 APR 11 PM 12:12  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

W16-19308

SM 4/13

**COVER LETTER**

**TO:** Charter Section  
Division of Corporations

**SUBJECT:** LUPE MEDIA  
Name of Resulting Florida Profit Corporation

The enclosed Certificate of Conversion, Articles of Incorporation, and fees are submitted to convert an "Other Business Entity" into a "Florida Profit Corporation" in accordance with s. 607.1115, F.S.

Please return all correspondence concerning this matter to:

Maria Alejandra Alvarez  
Contact Person

Firm/Company

3615 NE 207TH STREET #3112  
Address

Aventura FL 33180  
City, State and Zip Code

212travelco@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Maria Alejandra Alvarez at ( 305 ) 9875838  
Name of Contact Person Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

- \$105.00 Filing Fees
- \$113.75 Filing Fees and Certificate of Status
- \$113.75 Filing Fees and Certified Copy
- \$122.50 Filing Fees, Certified Copy, and Certificate of Status

**STREET ADDRESS:**  
New Filings Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**  
New Filings Section  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 22, 2016

MARIA ALEJANDRA ALVAREZ  
3615 NE 207TH ST #3112  
AVENTURA, FL 33180

SUBJECT: 212 TRAVEL, LLC  
Ref. Number: L15000133508

We have received your document for 212 TRAVEL, LLC and your check(s) totaling \$105.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

As a condition of a conversion, pursuant to s.605.0212(9) & s.605.0212(10), Florida Statutes, the entity must be active and current in filing its annual reports with the Department of State through December 31 of the calendar year in which the conversion is submitted for filing.

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

If we have had no written response within 60 days of this letter, we will consider your document abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

New Filing Section.

Letter Number: 716A00003649



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 15, 2016

MARIA ALEJANDRA ALVAREZ  
3615 NE 207TH STREET, #3112  
AVENTURA, FL 33180

SUBJECT: LUPE MEDIA  
Ref. Number: W16000019308

We have received your document for LUPE MEDIA and your check(s) totaling \$105.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Sorry for the oversight.

The document must be signed by a chairman, vice chairman, director, officer, or an incorporator, if directors or officers have not been selected.

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Maryanne Dickey  
Regulatory Specialist II

Letter Number: 416A00005317

**Certificate of Conversion**  
For  
**"Other Business Entity"**  
Into  
**Florida Profit Corporation**

This Certificate of Conversion **and attached Articles of Incorporation** are submitted to convert the following **"Other Business Entity"** into a **Florida Profit Corporation** in accordance with s. 607.1115, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is:

212 TRAVEL, LLC

Enter Name of Other Business Entity

2. The "Other Business Entity" is a LIMITED LIABILITY COMPANY  
(Enter entity type. Example: limited liability company, limited partnership,  
general partnership, common law or business trust, etc.)

first organized, formed or incorporated under the laws of FLORIDA  
(Enter state, or if a non-U.S. entity, the name of the country)

on 08/01/2015

Enter date "Other Business Entity" was first organized, formed or incorporated

3. If the jurisdiction of the "Other Business Entity" was changed, the state or country under the laws of which it is now organized, formed or incorporated:

4. The name of the Florida Profit Corporation as set forth in the **attached Articles of Incorporation**:

LUPE MEDIA **INC**

Enter Name of Florida Profit Corporation

5. If not effective on the date of filing, enter the effective date: \_\_\_\_\_

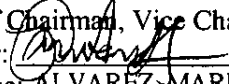
(The effective date: 1) cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State; **AND 2) must be the same as the effective date listed in the attached Articles of Incorporation, if an effective date is listed therein.**)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

DEPARTMENT OF STATE  
SUNSHINE STATE, FLORIDA  
16 APR 11 PM 12:12  
FILED

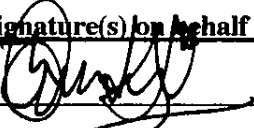
Signed this 3 day of FEBRUARY, 2016

**Required Signature for Florida Profit Corporation:**

Signature of Chairman, Vice Chairman, Director, Officer, or, if Directors or Officers have not been selected, an Incorporator: 

Printed Name: ALVAREZ, MARIA A. Title: ~~MANAGER~~ DIRECTOR

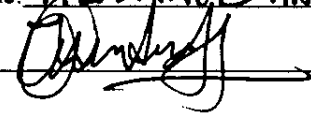
**Required Signature(s) on behalf of Other Business Entity:** [See below for required signature(s).]

Signature: 

Printed Name: ALVAREZ, MARIA ALEJANDRA Title: MANAGER

Signature: \_\_\_\_\_

Printed Name: ALVAREZ MARIA ALEJANDRA Title: DIRECTOR

Signature: 

Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

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16 APR 11 PM 12:12  
TALLAHASSEE, FLORIDA  
STATE OFFICE OF STATE  
SECRETARY

**If Florida General Partnership or Limited Liability Partnership:**

Signature of one General Partner.

**If Florida Limited Partnership or Limited Liability Limited Partnership:**

Signatures of ALL General Partners.

**If Florida Limited Liability Company:**

Signature of a Member or Authorized Representative.

**All others:**

Signature of an authorized person.

**Fees:**

Certificate of Conversion:	\$35.00
Fees for Florida Articles of Incorporation:	\$70.00
Certified Copy:	\$8.75 (Optional)
Certificate of Status:	\$8.75 (Optional)

**ARTICLES OF INCORPORATION**  
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

**ARTICLE I NAME**

The name of the corporation shall be: LUPE MEDIA INC

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/ mailing address is:

Principal street address  
7750 OKEECHOBEE BLVD #4-508

WEST PALM BEACH, FL 33411

Mailing address, if different is  
3615 NE 207TH ST #3112

AVENTURA, FL 33180

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

TO CONDUCT DIGITAL MEDIA BUSINESS

**ARTICLE IV SHARES**

The number of shares of stock is: 10

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: ALVAREZ, MARIA A. ~~MANAGER~~ DIRECTOR Name and Title: \_\_\_\_\_

Address: 7750 OKEECHOBEE BLVD #4-508 Address: \_\_\_\_\_  
WEST PALM BEACH, FL 33411 Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: ALVAREZ, MARIA ALEJANDRA  
Address: 7750 OKEECHOBEE BLVD #4-508  
WEST PALM BEACH, FL 33411

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: ALVAREZ, MARIA ALEJANDRA  
Address: 7750 OKECHOOBEE BLVD #4-508  
PALM BEACH, FL 33411

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DEPARTMENT OF STATE  
ATTN: ASSISTANT SECRETARY  
TALLAHASSEE, FLORIDA

\*\*\*\*\*

*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*

Required Signature Registered Agent

02/03/2016

Date

*I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.*

Required Signature Incorporator

02/03/2016

Date